

Budget Initiative Fact Sheet

Office: Child and Family Services

Date: 12/13/11

Program: Fund for a Healthy Maine – Home Visitation

Initiative #: 7489

Account: 014-10A-095306

I. Budget Proposal Description:

This initiative proposes to eliminate funding from the Fund for a Healthy Maine for Home Visitation. This is 26.9 percent of the program's total funding.

II. Program Description:

Home visiting is defined as an evidence-based program, implemented in response to findings from a needs assessment. Home visiting is included as a primary service delivery strategy (excluding programs with infrequent, short-term or supplemental home visiting). It is offered on a voluntary basis to mothers, fathers, families, pregnant women, infants, and children.

Services are designed to insure safe home environments, promote healthy growth and development for babies and young children and provide key connections to state and local services as needs are identified.

Contracted home visiting program sites are located in various health, educational and community agency settings and are available in every county in Maine. Sites work closely with other community service providers to collaborate and avoid duplication of services.

III. Relevant Legislative History:

- State funded community- based home visiting was piloted originally in 1994 and expanded across the state in 2000 with the availability of funding from the Tobacco Settlement Funds.
- 2007, Title 22, §262: Home visiting
- 2011, Ch. 77, LD 1504, *Resolve, to Ensure a Strong Start for Maine's Infants and Toddlers by Extending the Reach of High Quality Home Visitation*
- Social Security Act, Title V, Section 511 (42 U.S.C. §701) as amended by Section 2951 of the Patient Protection and Affordable Care Act of 2010 (P.L. 111-148)

IV. Financial Information:

4 Years of Spending:

	SFY'08	SFY'09	SFY'10	SFY'11
General Fund				
Fund for a Healthy Maine	5,378,750	5,022,914	5,064,553	5,091,128
Federal Funds				
Total	5,378,750	5,022,914	5,064,553	5,091,128

Other sources of funding for program, i.e. FHM? x Yes ☐ No

V. Total Individuals Served:

The Maine Families Home Visiting Program serves approximately 2,500 families each year.

VI. Program Eligibility Criteria:

Families may take part in the program beginning in pregnancy and may receive visits until their child turns three years of age. Eligibility for ongoing services is determined by an individualized needs assessment. Focus is on the most vulnerable families, such as adolescent parents and those experiencing substance abuse, domestic violence, mental health issues, developmental/ health concerns or family stress.

VII. Current Budget Proposal:

1) Appropriation Increase: \$

2) Appropriation Decrease: (\$2,653,383)

3) Description of Budget Proposal:

This initiative proposes to transfer funding from the Fund for a Healthy Maine – Home Visitation program and redistribute to the Fund For a Healthy Maine – Medical Care account.

4) Percent of the reduction vs. total funding for the program: 26.9 percent

5) Any contracts impacted? ☒ Yes ☐ No

If yes, which ones?

Contract	Vendor	Total Contract \$ Prior to Reduction	Reduction	% of Total
CFS-12-1610	Advocates for Children	\$852,500	\$285,000	33%
CFS-12-1611	Aroostook Council for Healthy Families	568,750	170,000	30%
CFS-12-1612	Community Concepts	396,250	180,000	45%
CFS-12-1613	Downeast Community Hospital	452,500	108,000	24%
CFS-12-1615	Down East Health Services	397,500	145,000	36%
CFS-12-1616	Franklin County Children's Task Force	428,750	128,000	30%
CFS-12-1617	Goodall Hospital	745,000	280,000	38%
CFS-12-1619	KVCap	943,750	384,000	41%
CFS-12-1620	Teen and Young Parents	471,250	228,000	48%
CFS-12-1621	Penquis CAP	686,250	58,000	8%
CFS-12-1622	UM Coop Extension	296,250	128,000	43%
CFS-12-1623	Youth Alternatives	940,625	365,000	39%
CFS-12-1606	Maine Children's Trust*	978,766	212,383	22%
			\$2,671,383	

VIII. Legal Requirements?

IX. Maintenance of Effort Requirements? ☒ Yes ☐ No

If yes, please explain:

The Affordable Care Act – Maternal, Infant and Early Childhood Home Visiting Program grants (formula based grants and competitive expansion grant) were awarded to “effectively implement home visiting models (or a single home visiting model) in the state’s at-risk community(ies) to promote improvements in the benchmark and participant outcome areas as specified in the legislation.” States must use the federal funds to supplement, not supplant, funds from other sources for these early childhood home visiting services.

X. Q & A follow-up after committee session held on _____

Date